Arkansas SERFF Tracking Number: MDIC-125985164 State: Filing Company: State Tracking Number: 41321 Medico Insurance Company

Company Tracking Number: KH99101122009

TOI: MS04I Individual Medicare Supplement -Sub-TOI: MS04I.001 Plan A

Medicare Select

994rtes0112009 Product Name:

Project Name/Number:

Filing at a Glance

Company: Medico Insurance Company

Product Name: 994rtes0112009 SERFF Tr Num: MDIC-125985164 State: ArkansasLH State Tr Num: 41321 TOI: MS04I Individual Medicare Supplement -SERFF Status: Closed

Medicare Select

Sub-TOI: MS04I.001 Plan A Co Tr Num: KH99101122009 State Status: Approved-Closed Filing Type: Rate Co Status: Reviewer(s): Stephanie Fowler Author: Karl Hug Disposition Date: 01/21/2009

Date Submitted: 01/12/2009 Disposition Status: Approved Implementation Date: 01/21/2009

Implementation Date Requested: 04/01/2009

State Filing Description:

General Information

Project Name: Status of Filing in Domicile: Not Filed

Project Number: Date Approved in Domicile:

Domicile Status Comments: We did not market Requested Filing Mode: Review & Approval

the Medicare Select Plans in our domicile state

of Nebraska.

Deemer Date:

Explanation for Combination/Other: Market Type: Individual Submission Type: New Submission Group Market Size: Overall Rate Impact: 8% Group Market Type:

State Status Changed: 01/21/2009

Corresponding Filing Tracking Number:

Filing Description:

MEDICO INSURANCE COMPANY

Filing Status Changed: 01/21/2009

NAIC #31119

RE: Annual Filing of Medicare Experience & Rates

SERFF Tracking Number: MDIC-125985164 State: Arkansas
Filing Company: Medico Insurance Company State Tracking Number: 41321

Company Tracking Number: KH99101122009

TOI: MS04I Individual Medicare Supplement - Sub-TOI: MS04I.001 Plan A

Medicare Select

Product Name: 994rtes0112009

Project Name/Number:

Rate Schedules for Medicare Select Policy Forms MP-MS994A, MP-MS994B, MP-MS994C,

MP-MS994D and MP-MS994F

This filing includes the experience of the company and the supporting actuarial memorandum. Current and proposed rate schedules are attached.

Our submission includes a request for an 8% rate increase. Subject to your approval, the increase would be implemented after proper notification of the insureds.

Thank you for your review and approval of this filing. If you have any questions, please feel free to contact me.

Company and Contact

Filing Contact Information

Karl Hug, Compliance Analyst khug@gomedico.com
1515 S. 75th Street (800) 695-5976 [Phone]
Omaha, NE 68124 (402) 391-4858[FAX]

Filing Company Information

Medico Insurance CompanyCoCode: 31119State of Domicile: Nebraska1515 S. 75th StreetGroup Code: 364Company Type: Life and Health

Omaha, NE 68124 Group Name: Medico State ID Number:

(800) 695-5976 ext. [Phone] FEIN Number: 47-0122200

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No

Fee Explanation: one rate filing = \$50.00

Per Company: No

SERFF Tracking Number: MDIC-125985164 State: Arkansas

Filing Company: Medico Insurance Company State Tracking Number: 41321

Company Tracking Number: KH99101122009

TOI: MS041 Individual Medicare Supplement - Sub-TOI: MS04I.001 Plan A

Medicare Select

Product Name: 994rtes0112009

Project Name/Number:

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Medico Insurance Company \$50.00 01/12/2009 24957134

 SERFF Tracking Number:
 MDIC-125985164
 State:
 Arkansas

 Filing Company:
 Medico Insurance Company
 State Tracking Number:
 41321

Company Tracking Number: KH99101122009

TOI: MS04I Individual Medicare Supplement - Sub-TOI: MS04I.001 Plan A

Medicare Select

Product Name: 994rtes0112009

Project Name/Number:

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Stephanie Fowler	01/21/2009	01/21/2009

 SERFF Tracking Number:
 MDIC-125985164
 State:
 Arkansas

 Filing Company:
 Medico Insurance Company
 State Tracking Number:
 41321

Company Tracking Number: KH99101122009

TOI: MS041 Individual Medicare Supplement - Medicare Select Sub-TOI: MS041.001 Plan A

Product Name: 994rtes0112009

Project Name/Number: /

Disposition

Disposition Date: 01/21/2009

Implementation Date: 01/21/2009

Status: Approved

Comment: We have approved the requested 8% rate increase for Medicare Supplement Select Plans A, B, C, D and F. This approval is subject to the following:

Increases will not be given more frequently than once in a twelve-month period.

Company Name:	Overall % Rate	Written Premium	# of Policy	Premium:	Maximum %	Minimum %	Overall %	
	Impact:	Change for this	Holders	Holders		Change (where	Indicated	
		Program:	Affected for		required):	required):	Change:	
			this					
			Program:					
Medico Insurance	8.000%	\$1,294	5	\$16,181	%	%	8.000%	
Company								

 SERFF Tracking Number:
 MDIC-125985164
 State:
 Arkansas

 Filing Company:
 Medico Insurance Company
 State Tracking Number:
 41321

Company Tracking Number: KH99101122009

TOI: MS041 Individual Medicare Supplement - Sub-TOI: MS04I.001 Plan A

Medicare Select

Product Name: 994rtes0112009

Project Name/Number:

Item Type Item Name Item Status Public Access

Supporting DocumentHealth - Actuarial JustificationApprovedNoRaterate sheetsApprovedYes

SERFF Tracking Number: MDIC-125985164 State: Arkansas

Filing Company: Medico Insurance Company State Tracking Number: 41321

Company Tracking Number: KH99101122009

TOI: MS04I Individual Medicare Supplement - Medicare Select Sub-TOI: MS04I.001 Plan A

Product Name: 994rtes0112009

Project Name/Number: /

Rate Information

Rate data applies to filing.

Filing Method: Serff

Rate Change Type: Increase

Overall Percentage of Last Rate Revision: 7.000%

Effective Date of Last Rate Revision: 04/01/2008

Filing Method of Last Filing: Serff

Company Rate Information

Company Name:	Overall %	Overall % Rate	Written	# of Policy	Premium:	Maximum %	Minimum %
	Indicated	Impact:	Premium	Holders		Change (where	Change (where
	Change:		Change for	Affected for this		required):	required):
			this	Program:			
			Program:				
Medico Insurance	8.000%	8.000%	\$1,294	5	\$16,181	%	%
Company							

SERFF Tracking Number: MDIC-125985164 State: Arkansas
Filing Company: Medico Insurance Company State Tracking Number: 41321

Company Tracking Number: KH99101122009

TOI: MS041 Individual Medicare Supplement - Sub-TOI: MS041.001 Plan A

Medicare Select

Product Name: 994rtes0112009

Project Name/Number:

Rate/Rule Schedule

Review **Document Name:** Affected Form Rate Rate ActionInformation: **Attachments** Status: Numbers: Action:* (Separated with commas) Previous State Filing 37764 AR_994NW_MIC Approved rate sheets MP-MS994A, Revised Number: Rates as MP-MS994B, Percent Rate Change 8 Filed.pdf MP-MS994C, Request: MP-MS994F, MP-MS994D

Current Rate Schedule

Medico™ Insurance Company (formerly Mutual Protective Ins Co)
Omaha, Nebraska
MP-MS994A
Gross Premium Code: 994AH - Rate Group: 994A
MEDICARE SELECT - STANDARDIZED PLAN A

CURRENT RATE SCHEDULE - Arkansas For Forms Issued From 12/15/1998 Through 12/08/2000

> Plan A Issue Age Premium

65 & OV 2742.00

AREA FACTORS

A 0.85 B 0.92 C 1.00 D 1.08 E 1.17

F 1.26 G 1.36 H 1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 67.5% anticipated loss ratio.

MPRS994A(AR) 1/08

Proposed Rate Schedule

Medico™ Insurance Company (formerly Mutual Protective Ins Co)
Omaha, Nebraska
MP-MS994A
Gross Premium Code: 994AH - Rate Group: 994A
MEDICARE SELECT - STANDARDIZED PLAN A

PROPOSED RATE SCHEDULE - Arkansas For Forms Issued From 12/15/1998 Through 12/08/2000

> Plan A Issue Age Premium

65 & OV 2962.00

AREA FACTORS

A 0.85

B 0.92

C 1.00

D 1.08

E 1.17

F 1.26

G 1.36

H 1.70
OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 67.5% anticipated loss ratio.

MPRS994A(AR) DATE: 1/5/2009

Current Rate Schedule

Medico™ Insurance Company (formerly Mutual Protective Ins Co)
Omaha, Nebraska
MP-MS994B
Gross Premium Code: 994BH - Rate Group: 994B
MEDICARE SELECT - STANDARDIZED PLAN B

CURRENT RATE SCHEDULE - Arkansas For Forms Issued From 12/15/1998 Through 12/08/2000

> Plan B Issue Age Premium

65 & OV 2994.00

AREA FACTORS

A 0.85 B 0.92 C 1.00 D 1.08 E 1.17 F 1.26

F 1.26 G 1.36 H 1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 67.5% anticipated loss ratio.

MPRS994B(AR) 1/08

Proposed Rate Schedule

Medico™ Insurance Company (formerly Mutual Protective Ins Co)
Omaha, Nebraska
MP-MS994B
Gross Premium Code: 994BH - Rate Group: 994B
MEDICARE SELECT - STANDARDIZED PLAN B

PROPOSED RATE SCHEDULE - Arkansas For Forms Issued From 12/15/1998 Through 12/08/2000

> Plan B Issue Age Premium

65 & OV 3233.00

AREA FACTORS

A 0.85

B 0.92

C 1.00

D 1.08

E 1.17

F 1.26

G 1.36

H 1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 67.5% anticipated loss ratio.

MPRS994B(AR) DATE: 1/5/2009

Current Rate Schedule

Medico™ Insurance Company (formerly Mutual Protective Ins Co)
Omaha, Nebraska
MP-MS994C
Gross Premium Code: 994CH - Rate Group: 994C
MEDICARE SELECT - STANDARDIZED PLAN C

CURRENT RATE SCHEDULE - Arkansas For Forms Issued From 12/15/1998 Through 12/08/2000

> Plan C Issue Age Premium

65 & OV 3630.00

AREA FACTORS

A 0.85 B 0.92 C 1.00 D 1.08 E 1.17 F 1.26 G 1.36

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

H 1.70

Rates certify to a 67.5% anticipated loss ratio.

MPRS994C(AR) 1/08

Proposed Rate Schedule

Medico™ Insurance Company (formerly Mutual Protective Ins Co)
Omaha, Nebraska
MP-MS994C
Gross Premium Code: 994CH - Rate Group: 994C
MEDICARE SELECT - STANDARDIZED PLAN C

PROPOSED RATE SCHEDULE - Arkansas For Forms Issued From 12/15/1998 Through 12/08/2000

> Plan C Issue Age Premium

65 & OV 3920.00

AREA FACTORS
A 0.85
B 0.92
C 1.00
D 1.08
E 1.17
F 1.26
G 1.36
H 1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 67.5% anticipated loss ratio.

MPRS994C(AR) DATE: 1/5/2009

Current Rate Schedule

Medico™ Insurance Company (formerly Mutual Protective Ins Co)
Omaha, Nebraska
MP-MS994D
Gross Premium Code: 994DH - Rate Group: 994D
MEDICARE SELECT - STANDARDIZED PLAN D

CURRENT RATE SCHEDULE - Arkansas For Forms Issued From 12/15/1998 Through 12/08/2000

> Plan D Issue Age Premium

65 & OV 3386.00

AREA FACTORS

A 0.85 B 0.92 C 1.00 D 1.08 E 1.17 F 1.26 G 1.36 H 1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 67.5% anticipated loss ratio.

MPRS994D(AR) 1/08

Proposed Rate Schedule

Medico™ Insurance Company (formerly Mutual Protective Ins Co)
Omaha, Nebraska
MP-MS994D
Gross Premium Code: 994DH - Rate Group: 994D
MEDICARE SELECT - STANDARDIZED PLAN D

PROPOSED RATE SCHEDULE - Arkansas For Forms Issued From 12/15/1998 Through 12/08/2000

> Plan D Issue Age Premium

65 & OV 3657.00

AREA FACTORS

A 0.85

B 0.92

C 1.00

D 1.08

E 1.17

F 1.26

G 1.36

H 1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 67.5% anticipated loss ratio.

MPRS994D(AR) DATE: 1/5/2009

Current Rate Schedule

Medico™ Insurance Company (formerly Mutual Protective Ins Co)
Omaha, Nebraska
MP-MS994F
Gross Premium Code: 994FH - Rate Group: 994F
MEDICARE SELECT - STANDARDIZED PLAN F

CURRENT RATE SCHEDULE - Arkansas For Forms Issued From 12/15/1998 Through 12/08/2000

> Plan F Issue Age Premium

65 & OV 3784.00

AREA FACTORS

A 0.85 B 0.92 C 1.00 D 1.08 E 1.17

F 1.26 G 1.36 H 1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 67.5% anticipated loss ratio.

MPRS994F(AR) 1/08

Proposed Rate Schedule

Medico™ Insurance Company (formerly Mutual Protective Ins Co)
Omaha, Nebraska
MP-MS994F
Gross Premium Code: 994FH - Rate Group: 994F
MEDICARE SELECT - STANDARDIZED PLAN F

PROPOSED RATE SCHEDULE - Arkansas For Forms Issued From 12/15/1998 Through 12/08/2000

> Plan F Issue Age Premium

65 & OV 4086.00

AREA FACTORS
A 0.85
B 0.92
C 1.00
D 1.08
E 1.17

F 1.26 G 1.36 H 1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 67.5% anticipated loss ratio.

MPRS994F(AR) DATE: 1/5/2009

SERFF Tracking Number: MDIC-125985164 State: Arkansas State Tracking Number: 41321

Filing Company: Medico Insurance Company

KH99101122009 Company Tracking Number:

TOI: MS04I Individual Medicare Supplement -Sub-TOI: MS04I.001 Plan A

Medicare Select

Product Name: 994rtes0112009

Project Name/Number:

Supporting Document Schedules

Review Status:

Approved Health - Actuarial Justification Satisfied -Name: 01/21/2009

Comments:

Attachment:

AR_994NW_MIC Memo as Filed.pdf

Medico™ Insurance Company (formerly Mutual Protective Ins Co) Omaha, Nebraska

Actuarial Memorandum - Individual A&H Rate Filing Medicare Supplement Select Plans A, B, C, D and F Arkansas

1. Purpose of Filing

The purpose of this filing is to fulfill the requirements of an annual review and to demonstrate that the anticipated lifetime loss ratio of these plans meets the minimum state requirements in light of the included rate increase request. It is not intended for use for any other purpose.

2. Scope of Filing

This filing applies to Medicare Supplement Select Plans A, B, C, D and F. The forms were marketed by independent agents but are not available for sale anymore. This rate revision applies only to the in force business. In Arkansas there are 5 policies with total gross annualized premium of \$16,181 and average annualized premium of \$3,236. Nationwide there are 12,467 policies with total gross annualized premium of \$27,900,803 and average annualized premium of \$2,238. This data is based on the master-file extract as of September 30, 2008.

3. Benefits

The Standardized Medicare Supplement forms include the 994A, 994B, 994C, 994D and 994F. These plans meet the benefit requirements of Plans A, B, C, D and F Medicare Standard Plans respectively.

The benefits are provided on a restricted basis in accordance with the requirements of the model regulation governing Medicare Supplement and Select plans. No benefits will be paid if the policyholder chooses not to use the network unless at least one of the following three conditions exist:

- 1. The Network does not provide the services required.
- 2. The policyholder requires services while traveling outside the network service area (limited to the first through ninetieth day of each trip).
- 3. The services are provided for symptoms requiring emergency care and it is not reasonable to obtain such services through the network providers.

The forms are guaranteed renewable.

4. Rate Increase Request, Reasons for and Expected Effect on Premiums

This rate increase is being requested due to inflation of medical costs due to increases in provider charges and the increase in the Part A and B deductibles. The company is requesting an 8.00% increase in the premium rates. The rate increase percentage may vary for a particular policy due to the rounding of the premium rates. It is expected that the rate revision will be implemented on the later of April 1, 2009 or following the approval and the necessary time to give the policyholder sufficient notice of a rate change.

<u>5. Rate Justification Standard - Minimum Loss Ratio</u>
This filing demonstrates that both the projected future loss ratio and the anticipated lifetime loss ratio are higher than the minimum loss ratio for this type of form that is a Medicare supplement policy form, with a loss ratio of 65%.

Rate Increase History

Shown below are the effective dates and the percentage of past rate increases:

AVERAGE REVISIONS: All Filed Forms Combined

DE INEVISIONS. All I lieu	i dillia Collibilied	
Effective Year	Nationwide Revision %	Arkansas Revision %
1997	13.73%	NONE
1998	12.59%	NONE
1999	1.06%	NONE
2000	13.21%	NONE
2001	24.83%	39.97%
2002	14.71%	40.00%
2003	8.73%	15.00%
2004	3.22%	15.00%
2005	5.21%	8.00%
2006	6.02%	8.00%
2007	7.22%	8.00%
2008	7.59%	7.00%

Medico™ Insurance Company (formerly Mutual Protective Ins Co) Omaha, Nebraska

Actuarial Memorandum - Individual A&H Rate Filing Medicare Supplement Select Plans A, B, C, D and F Arkansas

7. Projection Assumptions

The following assumptions were used in generating the future premium and claims in order to generate the present value of future premium and claims and their loss ratio.

Interest - An effective annual rate of interest of 4.50% has been assumed for accumulating past experience and discounting projected future experience.

Terminations - An annual termination rate based on the original pricing assumptions have been assumed for projecting the in force into the future. A shock lapse rate has been calculated for when the rate increase percentage is greater than the trend.

Claim Cost Trend - A claim cost trend of 8.00% has been assumed for projecting the claims experience. The claim cost trend is based on the companies' experience.

Claim Seasonality - To reflect the calendar year seasonality of claims from the payment of Medicare deductibles and higher utilization before the valuation date, it has been assumed that more claims incurred in a calendar year are incurred before September 30, 2008. This difference can create a higher loss ratio for claims incurred before the valuation date rather than after. This assumption is based on actual company experience for Medicare supplement business.

Experience Data Credibility - The requested rate revision is based on nationwide experience since Arkansas experience has been determined to not be credible.

Premium Rate Increase - The requested 8.00% premium rate revision has been assumed with an effective date of April 1, 2009. For all years thereafter, annual rate increases of 8.00% have been assumed for all plans with effective dates on each of the anniversaries of the stated date.

8. Past Experience

The attached exhibit shows the past experience for the business. The experience is through September 30, 2008 and is based on nationwide experience. The accumulated value of past earned premium is \$746,565,946 and the accumulated value of past incurred claims is \$564,272,337. This results in a loss ratio of 75.58%.

9. Projected Future Experience

The future experience has been generated for 30 years using the business in force as of September 30, 2008. The loss ratio for the year 2008 has been adjusted for seasonality. Adjustments have been made to the experience applying the trend rates, termination rates, and rate increase assumptions as shown in the Projection Assumptions section. The present value of future earned premium is \$127,830,551 and the present value of future incurred claims is \$107,791,478. This results in a loss ratio of 84.32%.

10. Anticipated Lifetime Loss Ratio

The anticipated lifetime loss ratio is defined as the sum of the present value of past and projected incurred claims divided by the sum the present value of past and future earned premium. These values are summarized below:

Experience Period	Earned Premium	Incurred Claims	Loss Ratio
Past Years	746,565,946	564,272,337	75.58%
Projected Future	127,830,551	107,791,478	84.32%
Anticipated Lifetime	874,396,497	672,063,815	76.86%

The projected future loss ratio and the anticipated lifetime loss ratio are both greater than the required minimum loss ratio of 65%. This demonstrates that the premium and claims experience meets the minimum loss ratio requirements.

Medico™ Insurance Company (formerly Mutual Protective Ins Co) Omaha, Nebraska

Actuarial Memorandum - Individual A&H Rate Filing Medicare Supplement Select Plans A, B, C, D and F Arkansas

11. Actuarial Certification

I hereby certify that, to the best of my knowledge and judgment, the assumptions presented are expected to develop and are consistent with the company's business plan at the time of the filing, the anticipated lifetime loss ratio, future loss ratio, and the third year ratio all exceed the applicable ratio, the filed premium rates maintain the proper relationship between policies which had different rating methodologies, and the filing was prepared based on the current standards as promulgated by the Actuarial Standards Board including Standard No. 8 'Regulatory Filings for Health Plan Entities' and Standard No 23, the 'Data Quality' standard of practice.

Jill M. Burns, FSA, MAAA Chief Actuary

12. Attachments

- a) Past and Future Experience Exhibit
- b) State and Nationwide Experience Exhibit
- c) Detail Experience Exhibit
- d) Current and Proposed Rate Schedules

Past and Future Experience Exhibit - Past Experience

All Filed Forms Combined

Past Experience from inception through September 30, 2008

Year	Earned Premium	Incurred Claims	Loss Ratio	Written Premium	Chg in Unernd Prem	Paid Claims	Chg in Clm Res	Chg in Addl Res	Policy Count
1995	498.809	362.556	73%	747.843	249.034	155.826	206.730		1.586
1996	3.728.414	2.758.833	74%	4,485,093	756,679	2,083,456	675,377	23,747	8,153
1997	14.229.754	10,839,559	76%	15.547.547	1,317,793	8,570,928	2,268,631	188,141	22,931
1998	30.714.406	24.103.064	78%	31,946,866	1.232.460	20,276,131	3,826,933	382.985	39,083
1999	50,003,475	40,261,128	81%	51,220,261	1,216,786	36,377,152	3,883,976	666,685	57,606
2000	70.553.960	57.792.220	82%	71.243.484	689,524	53,603,691	4.188.529	1,837,294	67,779
2001	79.392.154	59.729.733	75%	79.233.837	-158.317	61,510,705	-1,780,972	1,662,733	52,100
2002	71,912,451	49.220.321	68%	71.345.987	-566.464	51,778,408	-2.558.087	1.604.780	41,959
2003	64,080,410	43,612,067	68%	63,492,756	-587,654	46,055,649	-2,443,582	1,887,497	33,986
2004	53.771.996	39,728,391	74%	53,003,188	-768,808	40,967,023	-1,238,632	1,387,230	27,837
2005	45.294.405	34.789.889	77%	44.898.308	-396.097	35.894.622	-1.104.733	845.928	22,384
2006	38,263,105	28,724,008	75%	37,687,596	-575,509	29,729,363	-1,005,355	-172,567	17,866
2007	32,173,471	24.838.773	77%	31.886.059	-287.412	25,690,522	-851.749	-549.386	14.227
2008	21,158,517	17,778,726	84%	20,934,798	-223,719	18,754,944	-976,218	39,513	12,467
Totals	575,775,327	434,539,268	75%	577,673,623	1,898,296	431,448,420	3,090,848	9,804,580	
Accum.									
Value	746,565,946	564,272,337	76%	750,925,090	4,359,144	555,909,423	8,362,914	13,145,290	

Incurred claims do not include the change in additional reserve.

The exhibit is based on nationwide experience.

Past and Future Experience Exhibit - Future Experience

All Filed Forms Combined

Future Experience starting October 1, 2008 through December 31, 2037

	Assumir	ng Current Pre	mium Rat	Assuming Revised Premium Rates and Trend					
	Earned	Incurred	Loss	EOY	Earned	Incurred	Loss	EOY	
Year	Premium	Claims	Ratio	Count	Premium	Claims	Ratio	Count	
1 001	1 Tomain	Cidiiii	rano	oount	1 1011110111	Ciamio	rano	Count	
2008	6,782,844	4,177,556	62%	11,742	6,782,844	4,219,560	62%	11,742	
2009	23,541,090	18,827,932	80%	9,314	24,960,005	19,969,142	80%	9,314	
2010	18,635,679	15,203,888	82%	7,370	21,339,639	17,415,469	82%	7,370	
2011	14,714,395	12,233,050	83%	5,820	18,197,344	15,133,488	83%	5,820	
2012	11,599,845	9,816,392	85%	4,594	15,493,215	13,115,352	85%	4,594	
2013	9,129,989	7,860,361	86%	3,614	13,169,927	11,342,121	86%	3,614	
2014	7,149,643	6,261,359	88%	2,829	11,138,360	9,757,626	88%	2,829	
2015	5,548,261	4,944,767	89%	2,196	9,335,068	8,322,334	89%	2,196	
2016	4,276,956	3,874,544	91%	1,696	7,771,757	7,042,772	91%	1,696	
2017	3,281,663	3,018,032	92%	1,303	6,440,241	5,924,758	92%	1,303	
2018	2,513,707	2,343,163	93%	999	5,327,784	4,967,903	93%	999	
2019	1,912,518	1,805,757	94%	758	4,377,854	4,134,792	94%	758	
2020	1,434,784	1,372,501	96%	567	3,547,040	3,394,149	96%	567	
2021	1,060,601	1,027,679	97%	420	2,831,752	2,744,728	97%	420	
2022	779,695	764,293	98%	310	2,248,286	2,204,577	98%	310	
2023	572,811	566,899	99%	228	1,783,866	1,766,018	99%	228	
2024	418,065	417,161	100%	165	1,406,106	1,403,513	100%	165	
2025	297,413	299,478	101%	116	1,080,336	1,088,181	101%	116	
2026	205,848	209,231	102%	81	807,550	821,081	102%	81	
2027	140,861	144,310	102%	55	596,809	611,620	102%	55	
2028	97,021	100,030	103%	38	443,951	457,866	103%	38	
2029	66,825	69,105	103%	26	330,241	341,617	103%	26	
2030	43,728	45,447	104%	16	233,386	242,641	104%	16	
2031	26,493	27,709	105%	10	152,714	159,769	105%	10	
2032	14,778	15,484	105%	5	91,998	96,426	105%	5	
2033	8,267	8,666	105%	3	55,585	58,284	105%	3	
2034	4,939	5,131	104%	2	35,862	37,271	104%	2	
2035	3,128	3,224	103%	1	24,528	25,294	103%	1	
2036	1,737	1,786	103%	1	14,711	15,128	103%	1	
2037	785	803	102%	•	7,177	7,345	102%	·	
2007	700	000	10270		,,	7,010	10270		
Total Pres.	114,264,369	95,445,737	84%		160,025,935	136,820,824	85%		
Value	96,670,563	79,902,809	83%		127,830,551	107,791,478	84%		

Incurred claims do not include the change in additional reserve.

The exhibit is based on nationwide experience.

State and Nationwide Experience Exhibit

All Filed Forms Combined

Experience from inception through September 30, 2008

		Arkansas	Experien	ce	Nationwide Experience					
	Earned	Incurred	Loss	Policy	Rider	Earned	Incurred	Loss	Policy	Rider
Year	Premium	Claims	Ratio	Count	Count	Premium	Claims	Ratio	Count	Count
1995			N/A			498,809	362,556	73%	1,586	
1996			N/A			3,728,414	2,758,833	74%	8,153	
1997			N/A			14,229,754	10,839,559	76%	22,931	
1998			N/A			30,714,406	24,103,064	78%	39,083	
1999	51,161	34,522	67%	128		50,003,475	40,261,128	81%	57,606	
2000	226,706	263,926	116%	288		70,553,960	57,792,220	82%	67,779	
2001	221,579	205,623	93%	148		79,392,154	59,729,733	75%	52,100	
2002	139,382	91,055	65%	64		71,912,451	49,220,321	68%	41,959	
2003	99,417	54,072	54%	45		64,080,410	43,612,067	68%	33,986	
2004	86,429	65,625	76%	34		53,771,996	39,728,391	74%	27,837	
2005	68,441	48,252	71%	20		45,294,405	34,789,889	77%	22,384	
2006	38,897	11,508	30%	10		38,263,105	28,724,008	75%	17,866	
2007	22,771	25,394	112%	7		32,173,471	24,838,773	77%	14,227	
2008	14,595	21,346	146%	5		21,158,517	17,778,726	84%	12,467	
Totals	969,378	821,323	85%			575,775,327	434,539,268	75%		
Accum. Value	1,267,408	1,086,190	86%			746,565,946	564,272,337	76%		

Incurred claims do not include the change in additional reserve.

Detailed Experience Exhibit

All Filed Forms Combined

Experience from inception through September 30, 2008

Issue Year	Exper Year	Earned Premium	Statement Incurred Claims	Loss Ratio	Written Premium	Chg in Unernd Prem	Paid Claims	Chg in Clm Res	Runout Incurred Claims	Loss Ratio	Runout Paid Claims	Runout Claim Reserve	Expected Claims	Act/Exp Ratio	EOY Count
Total	1995	498,809	362,556	73%	747,843	249,034	155,826	206,730	326,424	65%	326,424		230,282	157%	1,586
Total	1996	3,728,414	2,758,833	74%	4,485,093	756,679	2,083,456	675,377	2,713,725	73%	2,713,725		1,824,848	151%	8,153
Total	1997	14,229,754	10,839,559	76%	15,547,547	1,317,793	8,570,928	2,268,631	10,550,467	74%	10,550,467		7,548,008	144%	22,931
Total	1998	30,714,406	24,103,064	78%	31,946,866	1,232,460	20,276,131	3,826,933	23,206,655	76%	23,206,655		17,222,240	140%	39,083
Total	1999	50,003,475	40,261,128	81%	51,220,261	1,216,786	36,377,152	3,883,976	39,492,137	79%	39,492,137		29,781,285	135%	57,606
Total	2000	70,553,960	57,792,220	82%	71,243,484	689,524	53,603,691	4,188,529	56,219,639	80%	56,219,639		44,229,251	131%	67,779
Total	2001	79,392,154	59,729,733	75%	79,233,837	-158,317	61,510,705	-1,780,972	60,525,245	76%	60,525,245		52,650,567	113%	52,100
Total	2002	71,912,451	49,220,321	68%	71,345,987	-566,464	51,778,408	-2,558,087	50,101,119	70%	50,101,119		50,083,211	98%	41,959
Total	2003	64,080,410	43,612,067	68%	63,492,756	-587,654	46,055,649	-2,443,582	44,120,878	69%	44,120,015	863	45,766,348	95%	33,986
Total	2004	53,771,996	39,728,391	74%	53,003,188	-768,808	40,967,023	-1,238,632	39,907,647	74%	39,907,360	287	39,198,474	101%	27,837
Total	2005	45,294,405	34,789,889	77%	44,898,308	-396,097	35,894,622	-1,104,733	35,378,831	78%	35,373,812	5,019	33,660,183	103%	22,384
Total	2006	38,263,105	28,724,008	75%	37,687,596	-575,509	29,729,363	-1,005,355	29,454,416	77%	29,432,439	21,977	29,023,087	99%	17,866
Total	2007	32,173,471	24,838,773	77%	31,886,059	-287,412	25,690,522	-851,749	24,753,461	77%	24,595,624	157,837	24,887,928	100%	14,227
Total	2008	21,158,517	17,778,726	84%	20,934,798	-223,719	18,754,944	-976,218	17,788,091	84%	14,883,544	2,904,547	16,666,789	107%	12,467
Grand Accum.	Total Value	575,775,327 746,565,946	434,539,268 564,272,337	75% 76%	577,673,623 750,925,090	1,898,296 4,359,144	431,448,420 555,909,423	3,090,848 8,362,914	434,538,735 563,358,760	75% 75%	431,448,205 560,258,129	3,090,530 3,100,631	392,772,501 503,084,111	111% 112%	

Incurred claims do not include the change in additional reserve.

The exhibit is based on nationwide experience.